

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

SECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 041736
DEC 09 2004
CITY OF PORTLAND

This is to certify that Wellin & Co/NeoKraft Signs
has permission to Replace Kinko sign w/ 2 2x8 signs
AT 50 Monument Ct 027 F001001

provided that the person or persons whom or whomsoever accepting this permit shall comply with all of the provisions of the Statutes of the City of Portland and of the ordinances of the City of Portland regulating the construction, maintenance and repair of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is placed or closed-in. **NO WORK NOTICE IS REQUIRED.**

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____
DepartmentName

[Handwritten Signature]
12/8/04
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1736	Issue Date:	CBL: 027 FO01001
-----------------------	-------------	---------------------

Location of Construction: 50 Monument Sq	Owner Name: Wellin & Co	Owner Address: Po Box 533	Phone:
Business Name:	Contractor Name: NeoKraft Signs		
Lessee/Buyer's Name	Phone:		B-3

Past Use: Commercial	Proposed Use: Commercial replace Kinko sign with 2 2x8 signs	Permit Fee: \$94.00	Cost of Work: \$94.00	CEO District: 1
		FIRE DEPT: N/A Signature: [Signature]	INSPECTION: Use Group: U Type: Sign TBC 2003 Signature: [Signature]	

Proposed Project Description:
Replace Kinko sign w/ 2 2x8 signs

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: D. Anderson Date: 11/30/04

Permit Taken By: dmartin
Date Applied For: 11/23/2004

Zoning Approval

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>OK 11/24/04 Date: [Signature]</p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: [Signature]</p>	<p>Historic Preservation</p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input checked="" type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied to D.A.</p> <p>Date: [Signature]</p>
	<p>D. Anderson 11/30/04</p>		

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1736	Date Applied For: 11/23/2004	CBL: 027 FOOIOOI
------------------------------	--	----------------------------

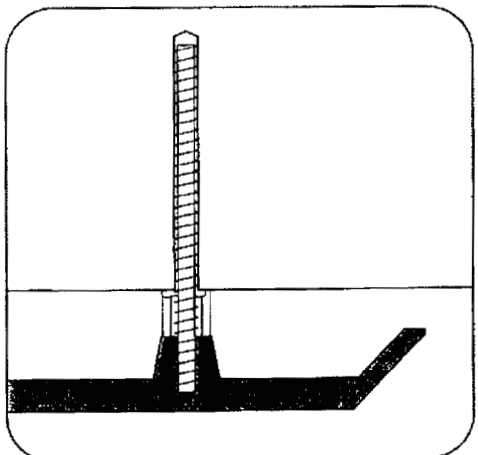
Location of Construction: 50 Monument Sq	Owner Name: Wellin & Co	Owner Address: Po Box 533	Phone:
Business Name:	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone (207) 782-9654
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	
Proposed Use: Commercial replace Kinko sign with 2 2x8 signs		Proposed Project Description: Replace Kinko sign w/ 2 2x8 signs	

Dept: Historical **Status:** Approved **Reviewer:** Deborah Andrews **Approval Date:** 11/30/2004
Note: **Ok to Issue:**

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 11/29/2004
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 1210812004
Note: **Ok to Issue:**

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.



Wind Load Calculations on Letters
with 5:1 ht:depth ratio

Size	Wind Face Load lbs. Force	Wind Side Load lbs. Force	Screw Shear Strength lbs. Force
6	13	5	720
10	35	15	960
12	50	20	960
14	68	25	960
18	112	40	960
24	199	70	1440
36	447	150	1920

Letter Data

Height in.	Face Area sq.in.	Side Area sq.in.	Screws each	Screw Area psi	Total Screw sq. in.
6	21.6	7.2	3	0.015	0.045
10	60	20	4	0.015	0.06
12	86.4	28.8	4	0.015	0.06
14	117.6	39.2	4	0.015	0.06
18	194.4	64.8	4	0.015	0.06
24	345.6	115.2	6	0.015	0.09
36	777.6	259.2	8	0.015	0.12

Assumptions and Facts

The point of failure will be the aluminum screws in shear at the minor thread diameter.

144 mph wind speed is equal to 82.7 lbs./sq. ft. (0.574 lbs./sq.in.)

tensile strength of break for 3003 aluminum is 16 000 psi.

Minor thread area in shear of a 10-24 aluminum screw is .015 sq. in. at 2 threads depth.

Therefore, each screw has a holding force in shear of 240 lbs..

Average face area of a sign letter is 0.6 x height squared.

Maximum depth of letters is 1.0" at 6", 1.5" at 12", 2.0" at 18", 2.5" at 24" and 3.0" at 36".

ALUMINUM STUDS, SET AND SEALED IN HOLES WITH SILICONE ADHESIVE
LETTER SHAPE MAY VARY
STUD-MOUNTING DETAIL
HALF-SCALE

FAX TO: LANEY
COMPANY: CITY OF PORTLAND
FAX: 207.874.8716
NO. OF PAGES: 1 OF 1

DATE: 12.07.2004
REF: 2895

JOB NAME: FED EX/KINKO'S
PORTLAND, ME

REPLY TO: PAUL LESSARD
TEL.: 207.782.9654
207.782.0009



Neokraft

Neokraft Signs Inc.
686 Main Street
Lewiston, Maine 04240
Telephone: 207.782.9654
Facsimile: 207.782.0009
1.800.339.2258
<http://www.neokraft.com>

Signage/Awning Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>50 Monument Square</u>			
Total Square Footage of Proposed Structure <u>32' sets of 16'</u> <u>32' for both sets total</u>		Square Footage of Lot <u>see C.A.D site Plan</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>27</u> Block# <u>1</u> Lot# <u>001</u>	Owner: <u>FedEx Kinko's</u> <u>13155 Noel Rd., Suite 1600</u> <u>Dallas, TX 75240</u>	Telephone: <u>214-550-7000</u>	
Lessee/Buyer's Name (If Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>Neokraft Signs, Inc.</u> <u>686 Main St.</u> <u>Lewiston, ME 04240</u> <u>207-782-9654</u>	Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D. signage = Total Fee: \$ 200 <u>94.0</u> Awning Fee = Cost Of Work: \$ _____ Total Fee: \$ _____	
Current use: <u>office and print center</u>			
If the location is currently vacant, what was prior use: <u>N/A</u>			
Approximately how long has it been vacant: <u>N/A</u>			
Proposed use: <u>Office Copies and Print Center / Shipping</u>			
Project description: <u>Remove existing non-lighted wall letters and install new 24" brass non-lighted wall letters in place of existing for (2) sets.</u>			
Contractor's name, address & telephone: <u>Neokraft Signs, Inc.</u> <u>207-782-9654</u> <u>686 Main St.</u> <u>Lewiston, ME 04240</u>			
Whom should we contact when the permit is ready: <u>Shane Moffett</u>			
Mailing address: <u>686 Main St.</u> <u>Lewiston, ME 04240</u>			
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>782-9654</u>			

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>11-15-04</u>
--	-----------------------

This is NOT a permit, you may not commence ANY work until the permit is issued.

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 50 Monument Square ZONE: B-3

CBL: _____

SWGLETENANTLOT? YES NO _____ MULTI TENANT LOT? YES _____ NO _____

MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES _____ NO

TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: see site plan Height: see site plan

INFORMATION ON PROPOSED SIGN(S):

N/A - FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS PROPOSED: _____
BLDG. WALL SIGN? (attached to bldg) YES NO _____ DIMENSIONS PROPOSED: 2'x8' and 2'x8'
(2) set

INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

IA { FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS: _____
BLDG. WALL SIGN(attached to bldg) ? YES NO _____ DIMENSIONS: 2'x8' and 2'x8'
(2) sets
N/A { AWNING? YES _____ NO _____ DIMENSIONS: _____
LOT FRONTAGE (FEET): _____

AWNING YES _____ NO _____ IS AWNING BACKLIT? YES _____ NO _____

HEIGHT OF AWNING: _____ LENGTH OF AWNING: _____ DEPTH: _____

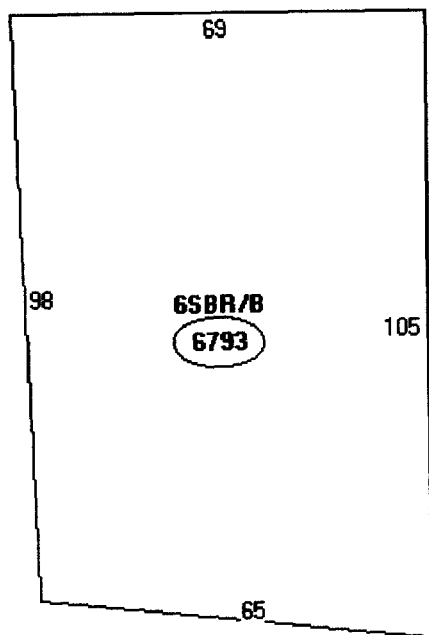
IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES _____ NO _____

IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? _____ s.f.

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED SIGNAGE ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: Sh. A. B. DATE: 11-15-04

***** FOR OFFICE USE ONLY *****



Descriptor/Area

A: 6SBR/B
6793 sqft

CHECKLIST FOR SIGN/AWNING APPLICATION

Applicants for a sign or awning permit are required to submit the following information to the Code Enforcement Office at the time of application:

- Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way. Amount must equal \$400,000.00.
- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- A sketch plan of lot, indicating location of buildings, driveways, and **any** abutting streets or rights of way, lengths of building frontages, street frontages, and all existing setbacks. Indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building facade dimensions for any signage attached to a building.
- A sketch or photo of any proposed sign(s) indicating *content, dimensions, materials, source of illumination, and construction method, as well as specifics of installation/attachment.*
- Certificate of Flammability required for awning or canopy at time of application.
- UL# required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
- Pre-Application Questionnaire completed and attached. Photos of existing signage attached.

Permit Fee for signage or awning-with-signage:
\$30.00 plus \$2.00 per square foot of sign.

Permit Fee for awning-without-signage is based on cost of work:
\$30.00 for the first \$1,000.00, plus \$9.00 for each additional \$1,000.00.

Base Application Fee for any Historic District signage is \$65.00 instead of \$30.00

INVENTORY & RECOMMENDATION DETAIL

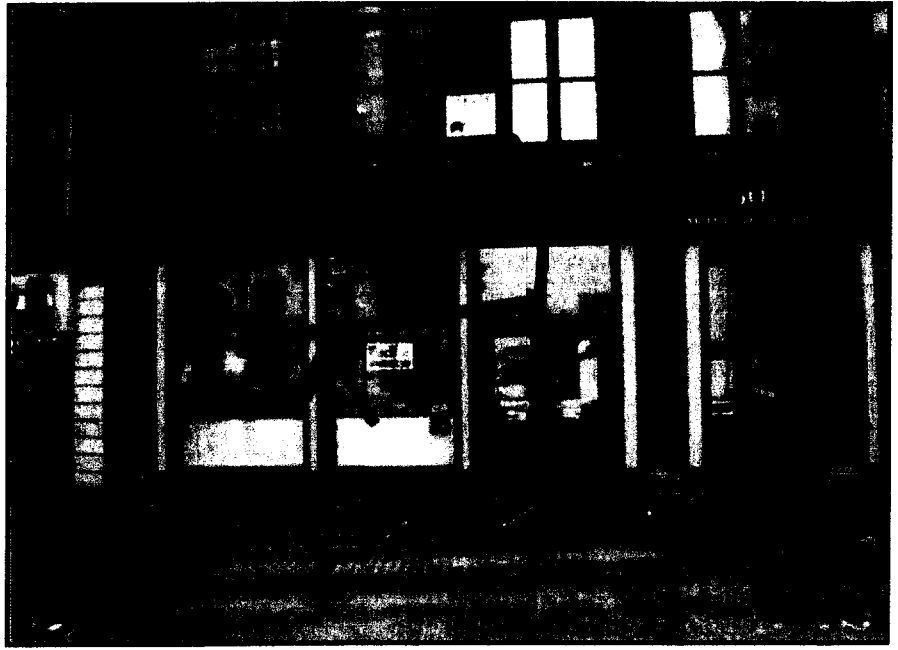
Survey ID: KF0017
 Portland ME, Monument Square
 50 Monument Sq
 Portland, ME 04101-4039

Office No: 168

E08

INVENTORY

Sign Text		
Kinko's		
Existing Sign Description		
Dimensional Letterset		
Height	Width	Depth
2'	8'	5"
Letter Height	OAH above grade	
2'	13' 6"	
Face Material	Sign Material	
Metal	Brass	
Visible Opening	Retainer Size	
N/A	N/A	
Surface Material	Surface Color	
N/A	N/A	
Available Height	Available Width	
360"	25'	
Illuminated	Illuminated Type	
No	N/A	
Double Face	Mount	
No	Flush -Wall	



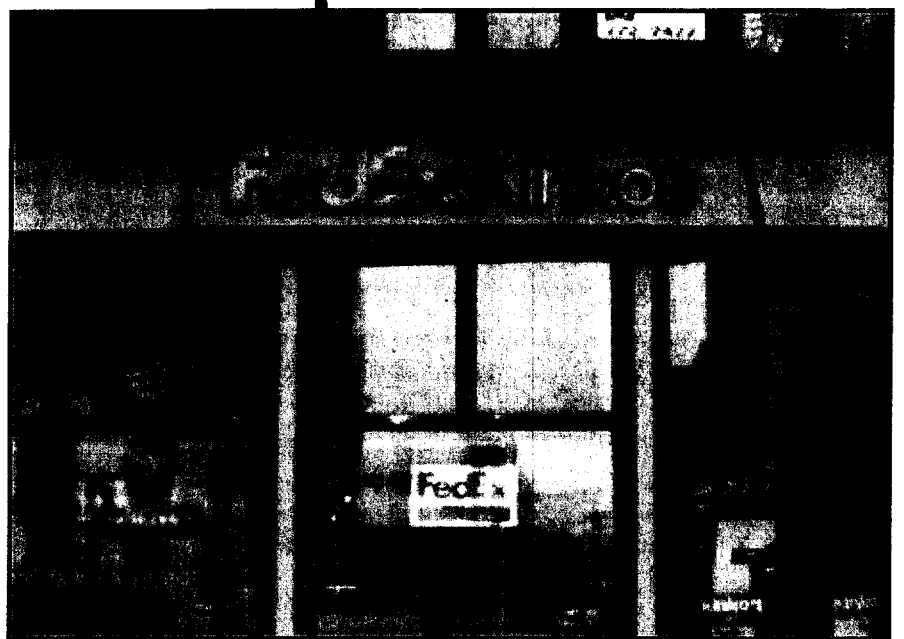
Inventory Comments

N/A

*Replacing above w/
below*

RECOMMENDATION

Recommended Action
TBD
Recommended Sign Type
FDKNI-CUS
Sign Type Description
Custom Non-Illuminated Channel Letters
Wall Repair Action
N/A
Signage Text
TBD



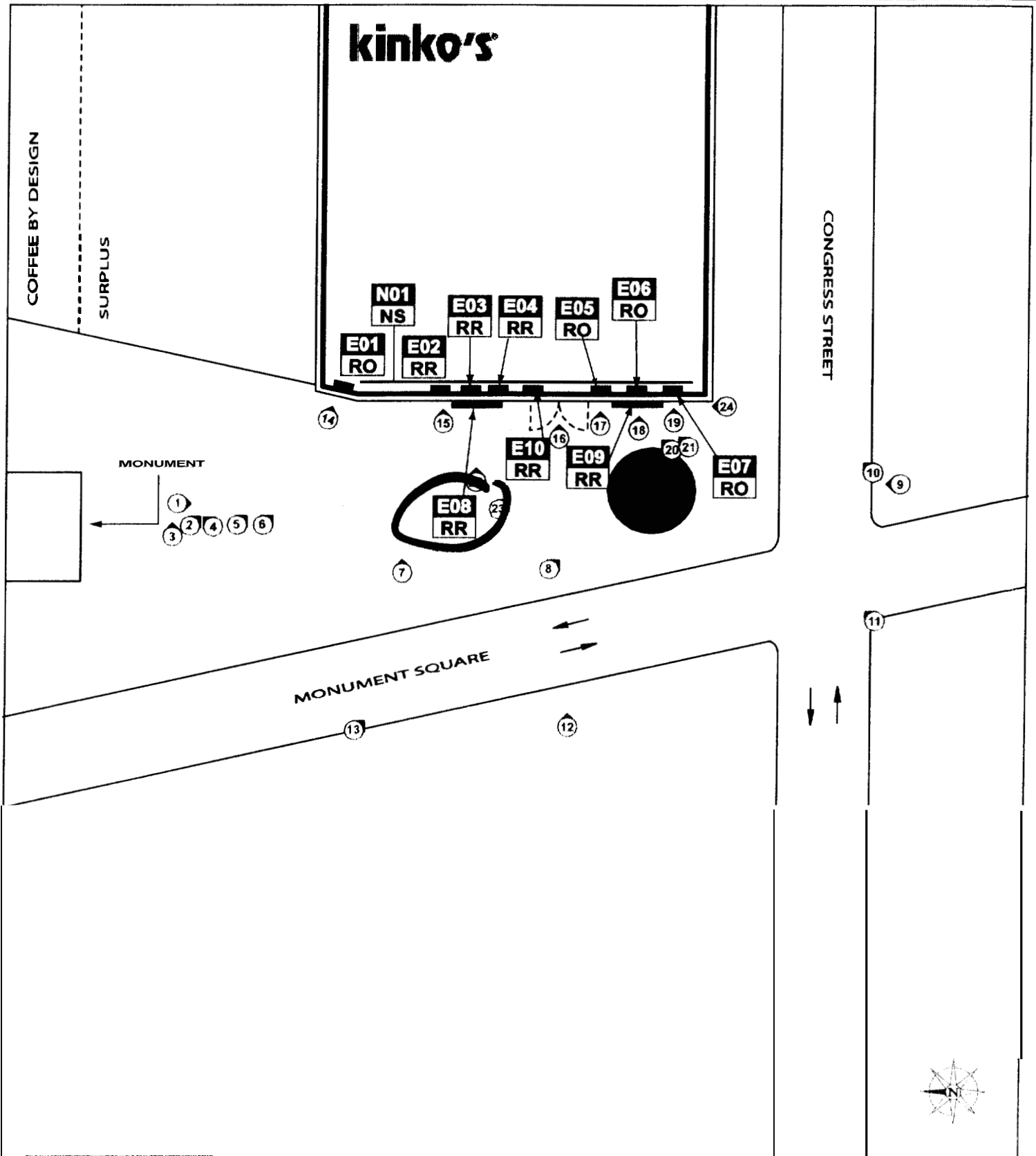
Recommendation Comments

1. FedEx Kinko's Brass Letters. Brush the "EX" in FedEx a different direction

C.A.D. SITE PLAN

Survey ID: KF0017
Portland ME Monument Square
50 Monument sq
Portland, ME 04101-4039

Office No.: 168





November 3, 2004

Re: FedEx Kinkos's signage

To whom it **may** concern,

FedEx has acquired **Kinko's** and has **changed the** name of the company to FedEx Kinko's **Office and** Print Center. With **this** change **we have** a large **signage** project roll **out** in **process** to **reflect** this new company **name**.

FedEx Kinko's sign **vendors have** been **tasked** with sending **new** signage packages to our landlords for approval **and** for getting the city **permits** for **new** signage. **Each** of the sign packages sent out **has** been **reviewed and approved by** the design staff at FedEx **Kinko's**.

ImagePoint, Inc is **an** approved **sign** vendor working with **FedExKinko's** in the Northeast **Region**. **They** will be **responsible** for manufacturing, **landlord** approvals, permitting **and** installation (includes patch and painting where **existing signs** are located) of signage.

I would appreciate your cooperation in **this** review **as we** are **trying** to complete **this** roll out as quickly **as** possible. If you **have any** further questions or concerns please feel **free** to contact me at **any** time at my office **number 214-550-7518**.

Thank You,

Larry Jackson
Construction Project **Manager**
Re-Branding Signage Roll **Out**



ImagePoint™

Corporate Office
449 S Gay Street, Suite 100
Knoxville, TN 37902
Tel: 888 231 1511
Fax: 888 342 0445
www.imagepoint.com

November 3, 2004

Peter Wellin / ASSIST: Carol
Wellin & Company
97A Exchange 3
Suite 602
Portland, ME 04101

RE: Request for Landlord Authorization
FedEx Kinko's #44600188
60 Monument Sq.
Portland, ME 04101-4039

Dear Sir or Madam:

Your tenant, Kinkos, was purchased by FedEx. As a result, FedEx Kinko's Inc., has chosen ImagePoint to manufacture and install new signage at this location.

The new signage will comply with existing city zoning regulations and requirements. Your written approval of the new signage is required so that ImagePoint and its local agent can obtain local permits,

Enclosed are the signage recommendations and artwork approved by FedEx Kinko's for your site. Please review these recommendations and if you are in agreement, please sign and have notarized this form and return via mail and fax. In addition, please provide any Plot Plan or Parcel Information that you may have for this site. This will help expedite the permitting process.

In addition, please verify that the following contact information is correct for your office:

Contact Name: Peter Wellin / ~~ASSIST: Carol~~ Fax:
Phone: (207)878-5422
Email: Peter@wellinco.com

If you have questions or concerns, please contact me at (800) 444-7446 ext. 426

Thank you,

Freeman Smith
Project Manager, FedEx Kinkos

As owner/manager of the property at the above referenced location, I hereby authorize FedEx Kinko's Inc. to install the attached signage as recommended and manufactured by ImagePoint, Inc. Furthermore, I authorize ImagePoint and or their local agents to proceed with application(s) for and to secure necessary permit(s), and install new approved signage.

Approved by:) Peter Wellin (Signature) Date: 11/10/04
Wellin, Peter (Print)

Sworn to and subscribed before me this _____ day of _____, 20__

Signature of Notary Public

Print, Stamp, or Type Commissioned Name
Of Notary Public

Personally Known/Produced Identification

Type of Received Time: Nov. 10. - 2:38PM

CERTIFICATE OF LIABILITY INSURANCE

NO. 0207 11/12/04

PRODUCER Miller Agency, Inc. (M.C.L.) One Enterprise Drive P. O. Box 473 Shelton, CT 06484	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED ImagePoint P. O. Box 59043 Knoxville, TN 37950-9043	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURERS AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td>INSURER A: Hartford Insurance Group</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: Hartford Insurance Group		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: Hartford Insurance Group													
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURER LTR	INSURANCE TYPE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	31UENOC2041	03/01/04	03/01/05	EACH OCCURRENCE	\$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (EA OCCURRENCE)	\$300,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$10,000
					PERSONAL & ADV INJURY	\$1,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
A	AUTO	31UENOC2043	03/01/04	03/01/05	COMBINED SINGLE LIMIT (EA ACCIDENT)	\$1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS				BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/>				PROPERTY DAMAGE (Per accident)	\$
A	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA AGG	\$
A	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
						\$
						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	31WEOC2042	03/01/04	03/01/05	<input checked="" type="checkbox"/> W/STATUS-TORY LIMITS <input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT	\$1,000,000
	OTHER				E.L. DISEASE - EA EMPLOYEE	\$1,000,000
					E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 City of Portland is recognized as an additional insured with respect to general liability.

CERTIFICATE HOLDER City of Portland Permit Department 441 Congress Street Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE <i>Radar M. Crestella</i>
---	--

INVENTORY & RECOMMENDATION DETAIL

Survey ID: KF0017
 Portland ME Monument Square
 50 Monument Sq
 Portland, ME 04101-4039

Office No.: 168

E09

INVENTORY

Sign Text		
Kinko's		
Existing Sign Description		
Dimensional Letterset		
Height	Width	Depth
2'	8'	.5"
Letter Height	OAH above grade	
2'	13' 6"	
Face Material	Sign Material	
Brass	Metal	
Visible Opening	Retainer Size	
N/A	N/A	
Surface Material	Surface Color	
Drivit	N/A	
Available Height	Available Width	
30"	25'	
Illuminated	Illuminated Type	
No	N/A	
Double Face	Mount	
No	Flush -Wall	



Inventory Comments

N/A

Replacing above w/below

RECOMMENDATION

Recommended Action
RR
Recommended Sign Type
FDKNI-CUS
Sign Type Description
Custom Non-Illuminated Channel Letters
Wall Repair Action
N/A
Signage Text
(TS)



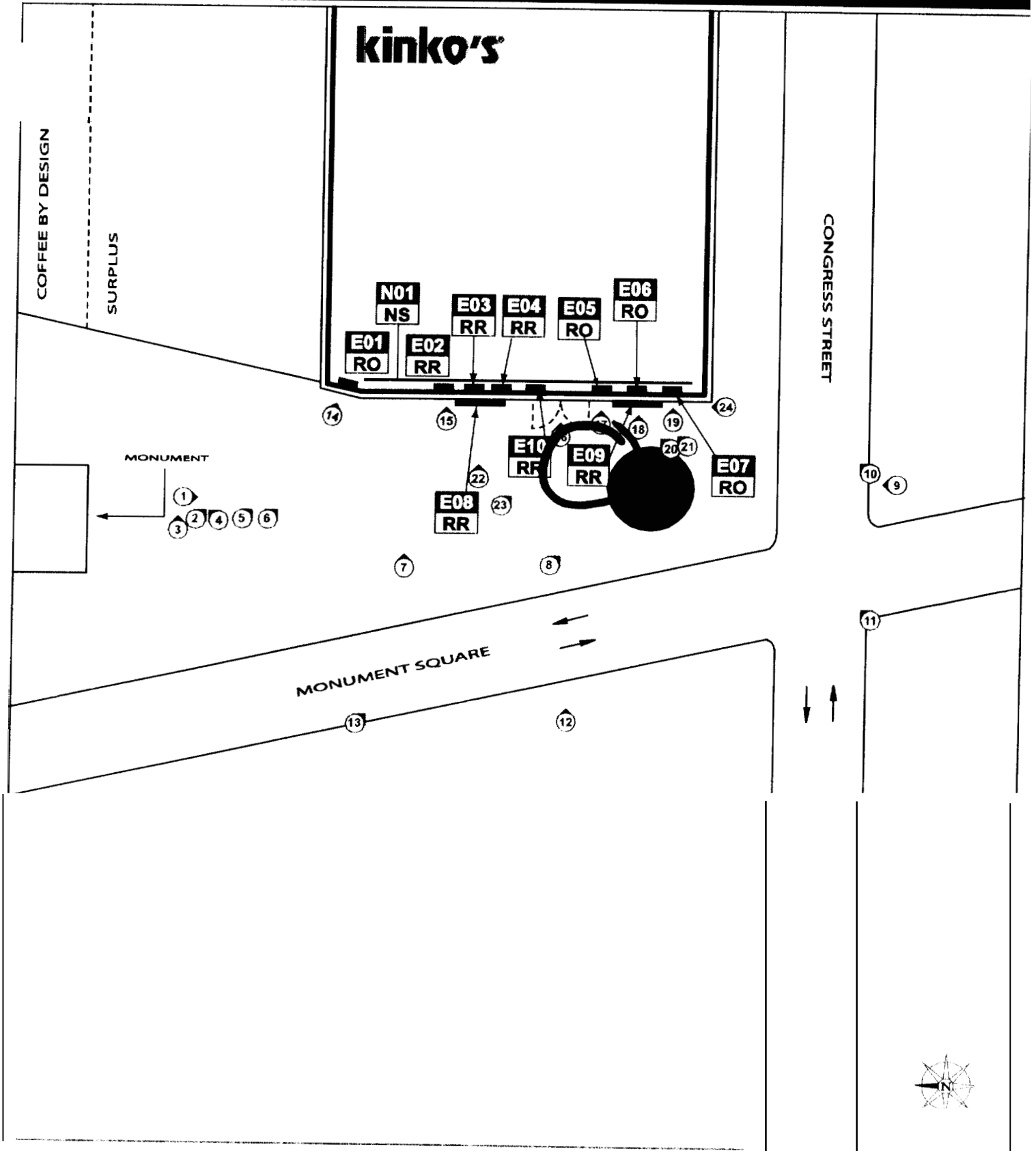
Recommendation Comments

(TS) (TS) Kinko's Brass Letters. Plus: the "EX" in Express a different direction

C.A.D. SITE PLAN

Survey ID: KF0017
PortlandME Monument Squa
50 MonumentSq
Portland, ME 04101-4039

Office 1 : 168



FedEx Kinko's

Office and Print Services

November 3, 2004

Re: FedEx Kinkos's signage

To whom it may concern,

FedEx has acquired Kinko's and has changed the name of the company to FedEx Kinko's Office and Print Center. With this change we have a large signage project roll out in process to reflect this new company name.

FedEx Kinko's sign vendors have been tasked with sending new signage packages to our landlords for approval and for getting the city permits for new signage. Each of the sign packages sent out has been reviewed and approved by the design staff at FedEx Kinko's.

ImagePoint, Inc is an approved sign vendor working with FedExKinko's in the Northeast Region, They will be responsible for manufacturing, landlord approvals, permitting and installation (includes patch and painting where existing signs are located) of signage.

I would appreciate your cooperation in this review as we are trying to complete this roll out as quickly as possible. If you have any further questions or concerns please feel free to contact me at any time at my office number 214-550-7518.

Thank You,

Larry Jackson
Construction Project Manager
Re-Branding Signage Roll Out



ImagePoint.

Corporate Office
445 S Gay Street, Suite 100
Knoxville, TN 37902
Tel: 605 251 1511
Fax: 605 342 0444
www.imagepoint.com

November 3, 2004

Peter Wellin / ASSIST: Carol
Wellin & Company
97A Exchange 3
Suite 602
Portland, ME 04101

RE: Request for Landlord Authorlzation
FedEx Kinko's #44600108
60 Monument Sq.
Portland, ME 04101-4039

bear Sir of Madam:

Your tenant, Kinkos, was purchased by FedEx. As a result, FedEx Kinko's Inc., has chosen ImagePoint to manufacture and install new signage at this location.

The new elgnage will comply with existing city zoning regulations and requirements. Your written approval of the new signage is required so that ImagePoint and its local agent can obtain local permits,

Enclosed are the signage recommendations and artwork approved by FedEx Kinkos for your site.¹ Please review these recommendations and if you are in agreement, please sign and have notarized this form and return via mail and fax. In addition, please provide any Plot Plan or Parcel Information that you may have for this site. This will help expedite the permitting process.

In addition, please verify that the following contact information is correct for your office:

Contact Name: Peter Wellin / ~~ASSIST: Carol~~ Fax:
Phone: (207) 879-5422
Email: Peter@wellinco.com

If you have questions or concerns, please contact me at (800) 444-7448 ext. 426

Thank you,

Freeman Smith
Project Manager, FedEx Kinkos

As owner/manager of the property at the above referenced location, I hereby authorize FedEx Kinko's Inc. to install the attached signage as recommended and manufactured by ImagePoint, Inc. Furthermore, I authorize ImagePoint and or their local agents to proceed with application(s) for and to secure necessary permit(s), and install new approved signage.

Approved by:) [Signature] (Signature)
Wellin, Peter (Print)

Date: 11/10/04

Sworn to and subscribed before me this _____ day of _____, 20__

Signature of Notary Public

Print, Stamp, or Type Commissioned Name
Of Notary Public

Personally Known/Produced Identification

Type of Received Time: Nov. 10. - 2:38PM _____

PRODUCER
 Miller Agency, Inc. (M.C.L.)
 One Enterprise Drive
 P. O. Box 473
 Shelton, CT 08484

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
 ImagePoint
 P. O. Box 59043
 Knoxville, TN 37950-9043

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Hartford Insurance Group	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	31UENOC2041	03/01/04	03/01/05	EACH OCCURRENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (EA OCCURRENCE)	\$300,000
						MED EXP (Any one person)	\$10,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
						PRODUCTS - COMP/OP AGG	\$2,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY <input type="checkbox"/> ANY AUTO EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	31UENOC2943	03/01/04	03/01/05	COMBINED SINGLE LIMIT (EA accident)	\$1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
						AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
						EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	31WEOC2042	03/01/04	03/01/05	<input checked="" type="checkbox"/> NO STATUTORY LIMITS <input type="checkbox"/> OTHER	
						E.L. EACH ACCIDENT	\$1,000,000
						E.L. DISEASE - EA EMPLOYEES	\$1,000,000
						E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 City of Portland is recognized as an additional insured with respect to general liability.

City of Portland
 Permit Department
 441 Congress Street
 Portland, ME 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRY DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE

Sharon M. Cristella



Neokraft

Neokraft Signs Inc.
 686 Main Street
 Lewiston, Maine 04240
 Telephone: 207.782.9654
 Facsimile: 207.782.0009
 1.800.339.2258
<http://www.neokraft.com>

Transmittal to	CITY OF PORTLAND INSPECTIONS 389 CONGRESS STREET PORTLAND, ME 04101	Date	11.18.2004
		Job No.	2895
		Re.	FEDEX KINKO'S MAIL

Item	<input checked="" type="checkbox"/> Attached	<input type="checkbox"/> Hand Delivered	<input type="checkbox"/> Under separate cover	
	<input type="checkbox"/> Shop Drawings	<input type="checkbox"/> Prints	<input type="checkbox"/> Samples	<input type="checkbox"/> Specifications
	<input type="checkbox"/> Copy of letter	<input type="checkbox"/> Change Order	<input type="checkbox"/> Other	

Copies	Date	No.	Description
1 set	11.18.2004	2895	(1) COMPLETED SIGN PERMIT APPLICATION TO INSTALL (2) SETS OF NON-LIGHTED LETTERS FOR FEDEX KINKO'S LOCATED AT 50 MONUMENT SQUARE. PACKET INCLUDES ALL REQUIRED INFORMATION.
1		7459	CHECK NUMBER 7459 IN THE AMOUNT OF \$94.00 TO OBTAIN A SIGN PERMIT TO INSTALL (2) SETS OF NON-LIGHTED LETTERS FOR FEDEX KINKO'S AT 50 MONUMENT SQUARE.

Purpose	<input checked="" type="checkbox"/> For approval	<input type="checkbox"/> No exception taken	<input type="checkbox"/> Rejected
	<input checked="" type="checkbox"/> For your use	<input type="checkbox"/> Make corrections noted	<input type="checkbox"/> Review and comment
	<input type="checkbox"/> As requested	<input type="checkbox"/> Revise and resubmit	<input type="checkbox"/> Other

Remarks If you have any questions or need any more information to move this along don't hesitate to call me anytime.

copy to

From SHANE MOFFETT

If enclosures are not as noted kindly notify us at once.

OFFICE:\CLERICAL\TEMPLATES\TRANSMITTAL FORM DOT